FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600003779

FILED Jul 07 1997 8:00am Secretary of State

1. Corporation Name						
D B S Computer Systems, Inc.						
	D compace of are	mo, ziici				
Principal Place of Business Mailing Address						
		Mailing Address				
13404 SW First Terrace Miami, FL 33184						
PLEAME,	LT 22104					
					3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Address					April 30, 1996 4. FEI Number	
2. Principal Place of Business 21 13404 SW First Terrace 22 A. Mailing Address 25 26					65-0663076	Applied For
Suite, Apt. #, etc. Suite, Apt. #, etc.						Not Applicable \$8.75 Additional
27					5. Certificate of Status Desired	Fee Required
City & State City & State			***************************************	-	6. Election Campaign Financing	\$5.00 May Be
231					Trust Fund Contribution	Added to Fees
Žip	Country	Zip	Country		8. This corporation has liability for	
24	9. Name and Address of Curren	nt Registered Agent	[30]		Florida Statutes 10. Name and Address of New Re	Yes No
	5. HARRING BING AUGUSTON OF COLUM	It ughistolog vilous	81	Name	IV. Hallie dilu Audites di Now Re	gistered Agent
CORER Corporate Agents Inc						
2601 Sc	outh Bayshore Dr., 1	19th Floor	82	Street A	Address (P.O. Box Number is Not Acceptab	ole)
Miami,	Miami, FL 33133				***	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			84	City		1-21 72 0-4
				,		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.050	J2 and 607.1508, Florida Statu	ites, the above	-named	corporation submits this statement for the p	purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
12.	Signature, typed or printed name of registered age	ont and title (Lapplicable (NO NO DIRECTORS	13.	nt signature	required when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE PERS AND DIRECTORS IN 10
TITLE	D	DELETE	1.1 TITLE		D, P, S	Change Addition
NAME	Alba, Mario	1.2 NAME		Alba, Mario		
STREET ADDRESS				ADDRESS	13404 SW First Terrac	:e
CITY - ST - ZIP	Miami, FL 33184		1.4 CITY - ST	1 - ZIP	Miami, FL 33184	
TITLE	D XX DELETE		2 1 TITLE		D, V	Change XX Addition
NAME	Gonzalez, Jose	2.2 NAME		Romero, Clodo		
STREET ADDRESS				ADDRESS	13404 SW First Terrac	e
CITY-ST-ZIP	Miami, FL 33184		2 4 CHY-SI-7# . Miami, FL 33184			
TITLE NAME		☐ DELETE	3 1 TITLE			☐ Change ☐ Addition
STREET ADDRESS			3.2 NAME 3.3 STREET	*nnneee		
CITY-ST-ZIP			3.4. CITY - S			÷
TITLE		DELETE	4.1 TITLE	11-611		Change Addition
NAME			4. 2 NAME			— • • • • • • • • • • • • • • • • • • •
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY - S1	1-21P		1
TITLE		☐ DELETE	5 1 TITLE			· Change Addition
NAME			5.2 NAME			$p_{\mathcal{P}_{\mathcal{P}}}$
STREET ADDRESS			5.3 STREET			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY - S1	1-ZIP		
NAME		□ brtru	6.1 TITLE 6.2 NAME	}	400002232 -07/08/9701004	Change Addition
STREET ADDRESS			6.3 STREET	Anneegg		UU1
CITY-ST-ZIP			6.4 CITY - ST	i	***550 . 00	
14. I do heret	by certify that the information supplie	ed with this filing does not qua	lify for the exer	mption st	I laled in Section 119.07(3)(i), Florida Statute	s. I further certify that the
Informatio	n indicated on this annual report or t fficer or director of the corporation of	supplemental annual report is ir the recaiver or trustee empor	i true and accu wored to exec	ırale and	that my signature shall have the same lega report as required by Chapter 607, Florida S	I affect as if made under eath: that
appears in	n Block 12 or Block 13 if changed, o	or on an attachment with an ac	dress.	-	* * * * * * * * * * * * * * * * * * *	tututou, and that my marite